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Bib Data Sheet

CONFIRMATION NO. 1929

<b>SERIAL NUMBER</b> 09/737,426	<b>FILING DATE</b> 12/15/2000 <b>RULE</b>	<b>CLASS</b> <del>318</del> 703	<b>GROUP ART UNIT</b> <del>2837</del> 2125	<b>ATTORNEY DOCKET NO.</b> 10244-005
<b>APPLICANTS</b> Kristinn R. Thorisson, New York, NY;				
<b>** CONTINUING DATA *****</b>				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 02/27/2001</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Allowance <u>Chp</u> Acknowledged Examiner's Signature Initials		<b>STATE OR COUNTRY</b> NY	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 30
				<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> 20583				
<b>TITLE</b> Method for designing an interactive system				
<b>FILING FEE RECEIVED</b> 445	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	